IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1723

THE CHARLES

Applicants: Appl. No.:

Watkins et al. 09/871,863

Conf. No.:

1448

Filed:

June 1, 2001

Title:

Hemodialyzer Headers

Art Unit:

1723

Examiner:

K. Menon Docket No.: DI-5717 US

Mail Stop NON-FEE AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## CERTIFICATE OF MAILING BY FIRST CLASS MAIL UNDER 37 CFR 1.8

Sir:

I hereby certify that the following documents relating to the above-identified application:

- 1. Amendment Transmittal Letter (duplicate);
- 2. Amendment (7 pages).

are being deposited with the United States Postal Service with sufficient postage as First

Class Mail in an envelope addressed to:

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

on May 6, 2003.

Respectfully submitted,

ailing Correspondence

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AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Watkins (a.l.)						Docket No. DI-5717	
Serial No 09/871,863	_ MAY U 9 2002	ing Date se 1, 2001		Examiner K. Menon			Group Art Unit 1723
Invention: HEMODIA PROPRIED HEADERS  TO THE ASSISTANT COMMISSIONER FOR PATENTS:  Transmitted herewith is an amendment in the above-identified application.							
TO THE ASSISTANT COMMISSIONER FOR PATENTS:  Transmitted herewith is an amendment in the above-identified application.  The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUM	MBER EXTRA	RATE	Ξ	ADDITIONAL FEE
TOTAL CLAIMS	27 -	32 =		MS PRESENT 0	) x \$18	8.00	FEE \$0.00
INDEP. CLAIMS	3 -	4 =	:			34.00	\$0.00
Multiple Depende	ent Claims (check if appl	olicable)					\$0.00
		TOTAL ADDITION	NAL FEE F	OR THIS AM	ENDMEN	т	\$0.00
<ul> <li>No additional fee is required for amendment.</li> <li>☐ Please charge Deposit Account No. in the amount of         A duplicate copy of this sheet is enclosed.</li> <li>☐ A check in the amount of to cover the filing fee is enclosed.</li> <li>☑ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1818         A duplicate copy of this sheet is enclosed.</li> <li>☒ Any additional filing fees required under 37 C.F.R. 1.16.</li> <li>☒ Any patent application processing fees under 37 CFR 1.17.</li> </ul> Dated: May 6, 2003 Robert M. Barrett							
Reg. No. 30,142 BELL, BOYD & LLOYD LLC P.O. Box 1135 Chicago, IL 60690-1135 Phone: 312-807-4204				I certify that this document and fee is being deposited on with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.  Signature of Person Mailing Correspondence			
				Typed or Printed Name of Person Mailing Correspondence			



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MAY 12 2003 TO 1700

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**HEMODIALYZER HEADERS** 

Art Unit: Examiner:

K. Menon

Docket No.:

DI-5717 US

Honorable Commissioner of Patents Washington, DC 20231

## **AMENDMENT**

Sir:

In response to the Office Action dated March 20, 2003, please amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 6 of this paper.